

UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL						
OMB Number:	3235-0076					
Expires:	May 31, 2005					
Estimated average burden						
hours per respo	nea 16.00					

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Name of Offering (check if this is an amendment and name has changed, and indicate change.)	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	□ ULOE 04047764
A. BASIC IDENTIFICATION DATA	
Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	
Sharp/Ensley Program	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
152 E. Reynolds Road Suite 201, Lexington, KY 40517	(859) 245 - 3377
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	(859) 245 - 3377 Telephone Number (Including Riea Code)
Brief Description of Business	CT 2 6-200
Development of oil & gas properties	THOMSU.
Type of Business Organization corporation	olease specify):CO—ownership of gas leasehold working interests
Month Year Actual or Estimated Date of Incorporation or Organization: 12 04 K Actual Estin Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	nated

GENERAL INSTRUCTIONS

Federal

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

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Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Director Managing Partner Full Name (Last name first, if individual) Energy Associates, Inc. Business of Residence Address (Number and Street, City, State, Zip Code) 152 E. Reynolds Rd. Suite 201, Lexington, KY 40517 Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner **Executive Officer** Director General and/or Managing Partner Full Name (Last name first, if individual) (Number and Street, City, State, Zip Code) Business or Residence Address Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Beneficial Owner Executive Officer General and/or Promoter Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Beneficial Owner Executive Officer General and/or Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) (Use blank sheet, or copy and use additional copies of this sheet, as necessary)

B. INFORMATION ABOUT OFFERING		
	Yes	No
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?		X
Answer also in Appendix, Column 2, if filing under ULOE. 2. What is the minimum investment that will be accepted from any individual?	£00=	·
2. What is the minimum investment that will be accepted from any individual?		5.00
3. Does the offering permit joint ownership of a single unit?	Yes □	No X□
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, a		
commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offerir If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a sta		
or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of su		•
a broker or dealer, you may set forth the information for that broker or dealer only.		
Full Name (Last name first, if individual)		
NO Commissions will be paid. Business or Residence Address (Number and Street, City, State, Zip Code)		
Business of Residence Address (Number and Street, City, State, Zip Code)		•
Name of Associated Broker or Dealer		
·		,
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers		
(Check "All States" or check individual States)	🗀 Al	States
AL AK (AZ) AR (CA) (CO) CT DE DC FL (GA)) HI	ID
IL IN IA KS KY LA ME MD MA MI MN	MS	MO
MT NE NV NH (NJ) NM NY (NC) NO OH OK	OR	PA
RI SC SD (TN) TX (UT VT (VA) (WA) WV WI	WY	PR
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Name of Associated Broker or Dealer	an administrative (APA (APA (APA (APA (APA (APA (APA (AP	
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers		
(Check "All States" or check individual States)	🔲 Al	States
AL AK AZ AR CA CO CT DE DC FL GA	Н	ID
IL IN IA KS KY LA ME MD MA MI MN	MS	MO
MT NE NV NH NJ NM NY NC ND OH OK	OR	PA
RI SC SD TN TX UT VT VA WA WV WI	WY	PR
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Name of Associated Draker or Donlar		
Name of Associated Broker or Dealer		
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers		
(Check "All States" or check individual States)	🔲 Al	l States
AL AK AZ AR CA CO CT DE DC FL GA	HI	ID
IL IN IA KS KY LA ME MD MA MI MN	MS	MO
MT NE NV NH NJ NM NY NC ND OH OK	OR	PA
RI SC SD TN TX UT VT VA WA WV WI	\overline{WY}	PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1.	Enter the aggregate offering price of securities included in this offering and the total amount alrea sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, che this box and indicate in the columns below the amounts of the securities offered for exchange a already exchanged.	eck	
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	\$
	Equity		
	Common Preferred	The second training to the second training of the second second to the second s	And any designation of the second of the second of the second
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests		
	Other (Specify <u>oil & gas lease)working interests</u> *the sale of 28 units at \$37500.00 per unit	\$1050000.00	_{\$75000.00}
	Answer also in Appendix, Column 3, if filing under ULOE.	\$ <u>1030000</u>	\$ <u></u>
2.	Enter the number of accredited and non-accredited investors who have purchased securities in the offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of the purchases on the total lines. Enter "0" if answer is "none" or "zero."	ate	Annua
	Accredited Investors	Number Investors 3	Aggregate Dollar Amount of Purchases \$75000.00
	Non-accredited Investors SALES TO AC	CREDITED INV	ESTORS ONLY
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		`
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities old by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1	he	
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
•	Regulation A		\$
	Rule 504		\$
	Total		\$
	a. Furnish a statement of all expenses in connection with the issuance and distribution of t securities in this offering. Exclude amounts relating solely to organization expenses of the insur The information may be given as subject to future contingencies. If the amount of an expenditure not known, furnish an estimate and check the box to the left of the estimate.	the er.	
	Fransfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees		\$
	Accounting Fees		\$
	Engineering Fees	·····	\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Evnenger (identify)		•

C. OFFEBING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	c. Offering price, number of investors, expenses and use	OF PROCEEDS	
and	Enter the difference between the aggregate offering price given in response to Part C — Quest lotal expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted ceeds to the issuer."	gross	s
eacl che	licate below the amount of the adjusted gross proceed to the issuer used or proposed to be used to find the purposes shown. If the amount for any purpose is not known, furnish an estimate the box to the left of the estimate. The total of the payments listed must equal the adjusted ceeds to the issuer set forth in response to Part C — Question 4.b above.	e and	
		Payments t Officers, Directors, o Affiliates	& Payments to Others
Sala	aries and fees	🔲 \$	\$
	chase of real estate		
	chase, rental or leasing and installation of machinery I equipment	[] \$	[] \$
Cor	nstruction or leasing of plant buildings and facilities	s	\$
offe	quisition of other businesses (including the value of securities involved in this ering that may be used in exchange for the assets or securities of another uer pursuant to a merger)		\$
	payment of indebtedness		
	orking capital		
	ner (specify): Turnkey Drilling & Completion costs	🗓 \$_105000	
			\$
Col	lumn Totals	······ 🛭 \$1050000).OO[\$
	tal Payments Listed (column totals added)		1050000.00
	D. FEDERAL/SIGNATURE		
The issuignatur	ner has duly caused this notice to be signed by the undersigned duly authorized person. If this re constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commation furnished by the issuer to any non-accredited investor pursuant to paragraph (b)	notice is filed under ommission, upon wr	Rule 505, the following
ssuer (F	Print or Type)	Date (/
	arp/Ensley Program	L. Jo	1/21/20
Vame of	f Signer (Print or Type) Title of Signer (Print or Type)		10 10 00
Joł	hn R. Zakharia Energy Associates, Inc. Pr	esident, the	e offeror

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

		E. STATE SIGNATI	JRE					
1.	Is any party described in 17 CFR 230 provisions of such rule?			Yes	No X			
		See Appendix, Column 5, for s	tate response.					
2.	2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Fo D (17 CFR 239.500) at such times as required by state law.							
3.	The undersigned issuer hereby under issuer to offerees.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.						
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.							
	er has read this notification and knows t thorized person.	he contents to be true and has duly ca	aused this notice to be signed on its beh	alf by the	undersigned			
	Print or Type)	Signature	Date					
Sha	arp/Ensley Program				•			
Name (1	Print or Type)	Title (Print or Type)	Title (Print or Type)					
•								

Instruction.

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

2 3 4 1 Disqualification Type of security under State ULOE Intend to sell and aggregate (if yes, attach offering price Type of investor and explanation of to non-accredited offered in state amount purchased in State waiver granted) investors in State (Part C-Item 2) (Part E-Item 1) (Part B-Item 1) (Part C-Item 1) oil & gas Number of Number of lease working Non-Accredited Accredited interests State Yes No Investors Amount Investors Yes No Amount ALΑK AZ0 0 Χ 0 0 X 37500.00 ARCA0 0 0 0 Х 75000.00 Х CO 0 0 Χ 0 0 X 375000.00 CTDE DC FL GA 0 0 Χ 0 37500.00 0 Χ Н ID IL IN 0 0 X 0 .0 X 112500.00 IA KS KY 0 0 0 0 Χ X 37500.00 LA ME 0 0 Х 0 0 37500.00 Х MD MA Χ 0 0 0 0 X 37500.00 0 Х 0 ΜI 0 0 112500.00 X MN MS

APPENDIX

2 3 4 5 Disqualification Type of security under State ULOE Intend to sell and aggregate (if yes, attach offering price Type of investor and explanation of to non-accredited investors in State offered in state amount purchased in State waiver granted) (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) (Part B-Item 1) Number of Number of oil & gas Accredited Non-Accredited lease working Investors State Yes No Amount Investors Amount Yes No interests MO MT NE NV NH NJ X 0 0 X 75000.00 18750.00 NM NY NC 56250.00 0 243750.00 2 0 Χ ND ОН OK OR PA RΙ SCSD TN Χ 0 0 0. 131250.00 0. TX UT VT 0 0 Х 0 VA 0 37500.00 Χ WA 0 0 Χ 0 0 Χ 37500.00 WVWI

APPENDIX

				APP	ENDIX				
1	to non-a	d to sell accredited rs in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)		under Sta (if yes, explan- waiver	5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
WY			. 55.						
PR									